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THE

OLD METHODS

OF

TREATING CANCER

COMPARED WITH THE NEW.

BY

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ULCERATION OF THE THROAT AND WINDPIPE,

A PREDISPOSING CAUSE OF BRONCHITIS AND OTHER DISEASES OF THE AIR PASSAGES;

ALSO REMARKS UPON INJECTING THE LUNGS IN THESE DISEASES, AND THE ADVANTAGES TO BE DERIVED FROM THIS TREATMENT.

By JOHN PATTISON, M.D.

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PREFACE.

SINCE Cancer has become such a frequent disease, the question is daily asked—"What are the best means adopted for its treatment?" At the request of a few friends I have written this pamphlet, with the view of placing before the general reader the various means most in vogue with the profession of the present day, and the opinions of some of the most celebrated physicians and surgeons as to the results produced by these agents, and then, very briefly, to explain the *modus operandi* of my treatment, proving my statements by cases from my Note Book.

10, *Cavendish Road, St. John's Wood, London,*
4th November, 1857.

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ON CANCER.

"Can a greater perversion of the first principles of logic exist, than that displayed by observers, who, profoundly impressed with the frequent failure of all methods of cure, assume as their device the constant intractability of the disease; and, when eventually obliged to admit that growths recognised as cancers, do occasionally disappear under the influence of remedies, have recourse to the plea, that the disease in such instances was not really cancerous because it was cured."—*Walshe on Cancer*, p. 193.

It is not my intention at present to enter into the nature of cancer, further than stating, "That it is a malignant disease, the treatment of which has baffled the efforts of the most eminent surgeons of the present and past times." Although no specific for it has yet been discovered, still some of the modes of treatment adopted for its cure are much more efficacious than others. My intention in this small pamphlet is briefly to mention the most common methods of treatment adopted by the profession at the present day for cancer, and to compare the results with my own mode of treating the disease.

Ablation.

The first plan adopted was undoubtedly that of excision by the knife, and although the oldest and worst (for we read of it being common in the days of Hippocrates, who wrote against ablation as being useless and dangerous) yet I am sorry to say that it is the most frequent at the present time, especially in this country. The plan of removing the local disease by the knife when the constitution is affected (for I maintain that this scourge is not only local, but always constitutional) is surely not one founded on common sense. For we see that ablation has the same effect on cancer as pruning a tree or shrub has in the vegetable world,—it either kills it, or it sprouts out more luxuriantly than ever. So in cancer the operation, if it does not kill the patient, (for we hear of many cases where death has immediately followed the operation,) excites the malignant diathesis

of the disease to increased action, and in the great majority of cases, it reappears in a few short months,-not only in the place from which it has been removed, but also in the adjacent parts, and too frequently also in the lungs, liver, or other vital organs. I am not alone in this opinion, for we find the most celebrated surgeons who have written on this subject holding the same views.

Mr. Druitt says, "The first and most obvious remedy is *extirpation by the knife, against* which must be alleged the facts, that the removal of one affected part *cannot remove the diathesis, and that the disease is almost sure to return in the* original situation, or *in some other.*" Again, Mr. Druitt says, "*That the removal of the outward cancer, like the pruning of a tree, sometimes seems to rouse the activity of the diathesis, and give increased energy to the morbid growth, if produced afterwards.* That the entire *removal of all affected particles of tissue is often unattainable.* That *some patients are killed by the operation itself, and that some have died from being operated on, for what afterwards proved to be no cancer at all.*"—*Druitt's Surgeon's Vade-Mecum, sixth edition, pp.* 115 *and* 116.

We see that Mr. Druitt, although proposing ablation by the knife, yet acknowledges its danger, and the slight prospect of success it affords. Let us now hear what other distinguished men say.

Dr. M'Farlane, now Professor of the Practice of Medicine in the University of Glasgow states (*Medical Gazette,* 24th June, 1838) that of thirty-two cases of well-marked cancer of the breast, which were operated upon by himself, and eighty-six cases operated upon by his friends, *not one was permanently cured.* Several of the operations were fatal. He is of opinion that "the operation never arrests, but almost uniformly accelerates the progress of the disease."

Mr. Ferguson says, "My own experience coincides entirely with that of every unprejudiced observer, that when malignant growths are removed with the knife, their return is but too likely."

Professor Miller says, "It is only a small number of the many cases which present themselves to the surgeon which warrant operation."

M. Velpeau, of Paris, thinks "That half the tumours found in the breast ought not to be interfered with."

Mayo, in his "Outlines of Pathology," says, "After amputation of a schirrous breast, under the most favourable circumstances, I believe that in *ninety-nine cases out of one hundred the disease returns.*"

In a Report "On the Utility of Surgical Operations in Cancer," presented to the French Academy of Sciences by Dr. Leroy d'Etoilles, in 1844, it was shown, from documents furnished by 174 practitioners, that the average time from operation until death is one year and five months; and he adds, that in operating early it does not appear to be the fact that the tumour is prevented from degenerating.

The late Mr. Liston wrote; "Recourse may be had to the knife in some cases, but the circumstances must be very favourable indeed to induce a surgeon to recommend, or warrant him in undertaking any operation for the removal of malignant disease."

The late Professor Colles, of Dublin, wrote: "For my own part, it is an operation I would not press on a patient, or her friends at all; it is one by which very little service is rendered at any time; after submitting to it, the patient will get a relapse, and generally sink within two years."

Mr. Paget says, "He is not aware *of a single case of recovery;* and as to the influence of an operation in prolonging life, I believe that the removal of the local disease makes no material difference in the average duration of life."

These are the opinions of a few of the many men who have written against the use of the knife. From their professional status and experience, their views ought to have great weight and influence,—not only upon the conscientious surgeon, but they ought also to be known by the patients themselves, before they submit to such a fearful operation—an operation, even in the most

successful cases, that enfeebles the sufferer for months, (for the shock to the nervous system and the loss of blood is always great,) and in not a few instances producing speedy death. Such being the fearful risk of operations, and the clear evidence given by eminent surgeons as to its inutility even in checking this disease, it seems strange to me that men are still found to insist upon and perform them. If such be the general opinion against operations in the first stages, and its too frequent results, when the general health is but little impaired and the patient still retains her strength, what must the world think of that man who can coolly propose the knife in those cases where the vital energies are exhausted—when the patient is dying?

I was much astonished when I read the report of a Lecture delivered to the medical students at the Grosvenor Place School of Medicine upon the 8th of July last, and reported in the *Medical Times* of the following Saturday. At page 30 of that number (No. 367, New Series) we find the following instructions given to the students of that school "when they ought to use the knife":—

"It is, not to use it in the early stages of cancer,—not to use it unless the cancer is actually ulcerated, or growing so fast that the skin is about to give way. In such cases, especially where an open cancer gives great pain, and is wearing away the patient by bleeding or profuse fetid discharge, the knife is used in the hope of relieving suffering, and prolonging, not saving life."

I agree with this Lecturer in the last clause, "*not* saving life," for I am convinced that where an amputation is performed under such circumstances, that *nine* out of *ten* of the sufferers would perish; not from the disease, but from the unjustifiable surgical interference gravely recommended by a Lecturer to his medical class. Instead of "prolonging" life, I am satisfied by such a remedy, death would be speedy. Even the "hope of relieving suffering" is equally fallacious, for all surgeons are well aware that the great suffering is not during the operation (which can be rendered painless by means of chloroform and other anesthetics), but afterwards, when reaction takes place,—when inflammation commences, then, and not until then, is the full agony of

an operation felt; and I would ask any one, how few broken down frames, previously exhausted by this fearful malady, could bear the shock which all operations give to the system,—could bear the exhaustion produced even in the strongest, by the loss of blood, which is always great, and again rally? The Lecturer alone can answer this. For I am certain that no surgeon would propose ablation to a dying fellow creature. Such a proposal could only have arisen in a fertile brain from want of a proper knowledge of the true nature of cancer. It is not many years ago since the attention of the profession was called to this disease; and although we do expect public lecturers to be well informed as to new pathology and new treatments of cancer, yet certainly this is not always the case. But I am glad to say that among the public themselves there has arisen a proper feeling of distrust in regard to using the knife in this disease. I, however, lately met with two unfortunate cases in which the patients were deliberately deceived by their surgeons.

In the month of June last, a gentleman practising surgery in Glasgow was called to see a young lady with a cancerous tumour in her breast. She was not entirely satisfied with his opinion, and he proposed that a friend of his should also see her. To this friend he wrote, requesting him to see the lady, but on no account to let her know that it was cancer, for if he did, she would follow the example of the lady in —— Place, and be off to the Quack in London. It was a nice case for an operation, and to recommend one.*

This advice was followed. The poor young creature was persuaded that it was not cancer, and that an operation would cure her; believing their reiterated assurances she at last submitted, the operation was performed, and within four short weeks she was in her grave. I trust that this sad case will teach these gentlemen rather to allow poor suffering human creatures to come

* I have a letter from a lady who heard this statement from one of the surgeons themselves, and if necessary I can produce ample proofs as to the truth of this statement.

up to me, than to deceive them as to their state, and urge a worse than useless experiment by the barbarous knife. The other case I referred to was that of Anne Allen, thirty years of age; she was employed in a thread mill, not far from Paisley, Renfrewshire. Not two years ago she discovered a lump in her right breast; she showed it to the surgeon of the place, who said it must be cut out. To this she positively refused to submit. About three weeks after her refusal this gentleman came to her house one Sunday forenoon. Finding she was at church, he coolly awaited her return. On returning she was shocked to find him there with his assistant, and every preparation made for the operation. Again she refused to submit; but in spite of all her remonstrances her breast was cut off. Before the wound was quite healed the disease reappeared: they then told her, too truly, that nothing now could be done. I saw this poor unfortunate on the 22nd of August last, when I found extensive disease not only in the cicatrix, but also in the armpit, besides cancerous deposits in the liver and lungs. In such a case I could do but little, merely prescribing some simple remedies to relieve her sufferings. These facts are surely sufficient to convince any unprejudiced mind as to the evils resulting from the use of the knife.

Caustics.

Caustics, as remedial agents in this disease, were probably used at a very early date. In my opinion, with one exception, they are as dangerous as the knife, for they often act, not as a curative agent, but as an exciting cause of cancerous action. I see examples of this almost every day. I had under my care a lady, who, having a small pea-like tumour in her breast, she went to Sir Benjamin Brodie in the early spring of 1854, when he attempted to destroy it with caustic. The tumour was destroyed, but left behind it a deep cancerous cavity. This case, and this valuable life, is only one example of the many I see daily sacrificed to the use of caustics.* But if caustics prove

* I received a letter from the daughter of this lady, dated Ireland, 18th August, 1855, in which she says, "Will you allow me to correct a statement, I suppose of my mother's case, in the last pamphlet you sent to me? You say that the cancer,

too dangerous when applied to an external organ, like the breast, what must it be when applied to the tender womb? If we consider the action of caustics, they are, of course destructive; and, were it possible to confine this destructive action to disease only, their employment might, in some few cases, be advantageous; but it is wholly impracticable to do so. They must destroy sound and healthy as well as diseased textures. If used in the solid form (as potass fusa, or the potassa with quicklime), they immediately liquify, and spread over all parts in the vicinity of the disease, exciting inflammation, and many of its various results, as ulceration, bleeding, sloughing, and, in many cases, permanent contraction of parts, requiring operations subsequently, to restore them somewhat to their natural condition. Their application is not once only, but of repeated necessity; and the objections to their use, above stated, are in force on every separate application. Months after the commencement of their use they are as dangerous as at first. They are most unsatisfactory with reference to the disease which they attempt to cure, and they are positively dangerous to the healthy structures surrounding that disease.

Change in Disease.

It is acknowledged at present by all accurate observers, that the types of all diseases are changing, and that the treatment which would have proved beneficial ten or fifteen years ago, is now pretty certain to prove fatal. I refer more especially to blood-letting in the treatment of disease. Formerly all carried the lancet and the caustic case; the former has been thrown aside as dangerous, but I am sorry to say that the more dangerous of the two *is still retained*. Whether it is owing to atmospheric influence, or to other unknown causes, yet

when my mother applied to Sir B. Brodie, was small—the size of a pea. The fact is, that the cancer was the size of a small egg, and had already began to discharge. As this makes a material difference, I think you will be glad of a correction in favour of truth and fairness." Immediately upon receiving this letter, I wrote to the lady, thanking her for correcting me of an unintentional error. But if it is improper to attempt destroying even a small tumour the size of a pea by this agonising treatment, the attempt made in this case, by Sir Benjamin Brodie, to say the least was injudicious.

it is a certain fact, that ulcerated parts will not now be benefited, and will not now be healed under the influence of caustics as they formerly were; but in almost every case when caustic is now applied, the sore degenerates from a simple into a *malignant one*, proving in almost every case fatal. This is more marked perhaps in cancer of the tongue; and I do not think there is one surgeon in Great Britain who can bring forward a case where caustics have been applied to ulceration of this organ within the last six or ten years, and the patient recovered. I have never met with one; and in every one *I find the disease has been induced by the employment of caustics.* This is the more surprising to the anatomist, as no sore on any other part of the body is sooner or easier healed if left alone than one upon the tongue, owing to its great vitality. I have never met with any difficulty in treating these cases in the first instance, but every case of cancer of these parts, that has come under my observation lately, has been caused by the *injudicious use of caustics.* In proof of which I shall now quote a few cases extracted from my Case Book.

Cancer of Tongue induced by Caustics.

Case LXXXVII. Mrs. T.—23rd Feb., 1854. I saw this lady on this date. About eight months previous she felt a slight sore on the edge of the tongue, caused by a decayed tooth. She showed it to her family physician, Dr. Barnes, who cauterised the tongue frequently with nitrate of silver (lunar caustic). After each application the size of the sore rapidly increased, and became more painful. The glands of the neck were much enlarged when I saw her, and more than one-half of the tongue was in a state of cancerous ulceration. In this case I gave hopes of being able to check the disease, but she did not return. In all human probability, if the decayed tooth had been extracted, in the first instance, and the mouth cleansed with some simple wash, it would have easily healed, and cancer prevented, and this poor lady's life might now have been spared. So with the following case.

Of Tongue.

Case CLXXV. Mr. C.—This gentleman came to me on the 3rd November, 1854. Upon examination, I found all the tongue extensively diseased and ulcerated, and becoming daily worse. He had been under the care of Sir Benjamin Brodie, Mr. Hodgson, Mr. Shaw, Mr. Partridge, and others, and they had touched the tongue daily with a solution of caustic, and at this date I found the submaxillary and cervical glands much enlarged. To these

he had been ordered to apply *linseed poultices, to bring them into a state of ulceration.* So much for the treatment of cancer by surgeons of the present day. One more case.

Case CCLIX. Mr. K.—I was sent to see this gentleman on the 17th November, 1855. Last April he had a decayed tooth, which caused a small wart to arise on the tongue from the constant irritation. This gave little inconvenience, but having shown it to his family surgeon, he immediately cauterised it. This was done many times, and after each application it became worse. In June last he went to Mr. Ferguson who pronounced it to be cancer. At this time a great portion of the tongue was involved in disease. More caustics were again applied, when the glands of the neck commenced enlarging. I found the patient suffering dreadful agony, the tongue almost all destroyed, and the parotid so enlarged as with difficulty to allow the mouth to be opened sufficiently to introduce fluids, and the other glands were pressing on the larynx and trachea, so as to threaten suffocation.

Having shown that caustics are so dangerous when applied for the treatment of cancer, it is now necessary briefly to mention some of the caustics most frequently used.

Arsenic.

Arsenic was probably used in the treatment of this disease at a very early period. We read that Fuschias used it; it was also employed by Frere Come, and Dubois. Guy and Plunkett used it during the last century; and in more modern times it has been extensively employed by Dupuytren. All of these gentlemen employed it in combination with other ingredients. As to the final results of this treatment I have grave doubts, for before it could have much effect upon the disease, the quantity of the poison absorbed (for all applications to a raw surface must be rapidly absorbed into the system) would soon cause a speedy and excruciating death. As an internal remedial agent it has been used extensively for many hundred years, and according to the opinions of Doctors Copland, A. T. Thomson, Mr. Walshe, and many others (which ought to have due weight), it is of great benefit. My own experience is that to a certain extent it may be safely employed; but unfortunately it is one of those remedies that accumulate in the system, eventually producing its poisonous effects.

I was reading some time ago of the extraordinary use of arsenic either in Pomerania or Silesia. There, the peasants are in the habit of giving a few grains daily of this drug to their horses, which, for a time, produces what is called *long wind*, and enables them to pull heavy draughts up the hilly roads of that country with comparative ease. The coats of these arsenic-fed horses are smooth and shining, and the animals appear fat and healthy; but mark the result. In every instance, sometimes in a few months, or sometimes not until the lapse of a few years, these horses are suddenly seized with all the symptoms of poisoning produced by arsenic, and die in the most excruciating agony. Again, some of the peasants of that country are addicted to the use of this deleterious drug, desiring it with the same eagerness that we see a confirmed drunkard or opium-eater long for their stimulants. Those unfortunate men who once commence the habit, dare not leave it it off. At first their appearance is improved; they become ruddy, fat, and long winded, with every symptom of robust health. But this state does not continue long, although the time differs in different constitutions. They are sooner or later suddenly taken ill, with violent cramps and pains, dying in the most frightful agony. In the cases of these unfortunates there is no hope. No antidote that will avail at this stage has yet been discovered. Again, arsenic eaters are liable to a sudden and frightful death, even before the cumulative effects of the poison produce it. I mean that they resemble the drunkard, who, when suddenly deprived of his gin or spirits, is thrown into a state of delirium tremens; and so the arsenic eater, if deprived of his drug after the accustomed time (and in these wild regions arsenic cannot always be procured), is seized with all the symptoms of poisoning, and his death is speedy and awful.

In all cases where the symptoms of poisoning caused by the cumulative effects of this drug are produced, in this country, we have either a rapid excruciating death, or a prolonged life of misery and torture, in which death is prayed for by the sufferers.

When we see that such awful consequences result from the long use of this poison, although given in minute doses, in some cases produced in a few months, in other cases not produced until after its continued use for years (but always sure to take place), the question arises, "Is any surgeon justified in giving this poison for any length of time even if it does cure such a disease as cancer?"

Chloride of zinc. Chloride of zinc has been used as frequently as arsenic, and with much more safety, but its introduction as a remedial agent in this disease, is of comparative modern date. It was first used in France by M.M. Hänck and Canquoin, and in this country by Mr. Alexander Ure.—The latter gentleman records two cases of cure by this agent, which were permanent; but its application was excruciatingly painful and only successful as related by him in epithelial or superficial cancer.

Nitrate of silver and quicklime. Nitrate of silver (especially in cancer of the tongue) and even quicklime have been extensively used in the treatment of this disease, but as they only penetrate to a certain depth, and give rise to much irritation in all cases, they merely prove mischevious in exciting the malignant diathesis to renewed action.

Sulphate of copper. Sulphate of copper has lately been brought into vogue by the surgeon of the Cancer Hospital. He uses it extensively in cancer of the tongue combined with borax. With what safety to the sufferer I have many doubts, as it is very poisonous, and we all know that any application to the tongue must not only be absorbed, but even swallowed. For myself, I should hesitate a long time, before I would dare to use it in such cases.

Per-Manganate of Potassa. A few months ago a paragraph went the rounds of the provincial papers, telling us of the wonderful results produced by the per-manganate of potassa as a caustic for cancer. It was introduced by a surgeon of the Cancer Hospital. Its success has been as evanescent as many better things. It was fairly tried in one of our large public hospitals, and found to be quite useless.

The alkaline caustics have also been extensively used, especially for the destruction of non-ulcerated tumours. Not affecting the constitutional symptoms, these remedies have only proved injurious by exciting the parts to renewed action. The usual form is that of the Vienna paste.

Alkaline caustics.

The exceptional caustic I have before referred to is the sulphate of zinc when employed as a caustic in cancer and ulceration of the womb. In some cases it is safe and efficacious when applied to these parts. I was the first surgeon who used it in this form of disease. I have used it in such cases with marked success for many years. Dr. Simpson speaks highly of its efficacy.

Sulphate of Zinc.

Signor Llandolfi, physician to the King of Naples, a few years ago introduced a triple combination of caustics for the treatment of cancer. It was composed of the terchlorides of gold, zinc, and bromine. Many cures were reported as having been affected by these agents. A French commission, however, enquired into this treatment. Their report was very unfavourable. Only one of the reported cases was found to be cured, and they condemned its use, owing to the great pain it always caused.

Sig. Llandolfi.

Dr. Fell, of New York, has lately introduced a new combination of caustics with some success. His remedy is composed of the chloride of zinc and sanguinaria.

The preparations of iron, lead, gold, belladonna, conium, &c., &c., have all been extensively used, and each one has had its advocate, but alas they have all proved of no avail.

Iron, lead, gold, &c.

Carrot poultices has been highly recommended by the surgeon of the Cancer Hospital. In my hands, and in those of others, they have proved worse than useless. From their dragging nature, they give great pain, and from exciting the malignant diathesis, they prove highly injurious by increasing the disease.

Carrot poultices.

Leeching, low diet, and similar means adopted with the view

Leeching, low diet.

of starving the disease, have been attempted in vain. In all those cases where this treatment has been adopted, the disease has rapidly increased, and speedily proved fatal.

Lead and Oil.

In the same public charity where the carrot poultice, the sulphate of copper, and the per-manganate of potassa have been freely used; they also employ a preparation of lead mingled with oil. This injudicious application softens the tissues giving more room for the cancerous growths which rapidly increase. Unfortunately we find that in this charity, founded for the express purpose of curing cancer, few cures are ever affected. In proof, I shall take the evidence of one of the surgeons of that Institution, from a Report of a Meeting of the Medical Society of London, given in the *Medical Times* of 7th May, 1853 :—

"Dr. Tyler Smith said he hoped he was not out of order in asking Mr. Cooke whether, at the Institution with which he is connected, any cases of cancer had been cured, as was currently reported, by medical treatment. He asked the question solely in consequence of the extreme importance of the subject."

"Mr. Cooke replied that he had not seen any cases cured by such means."

Here, then, we have the evidence of one of the surgeons of the Cancer Hospital, that no case has been cured *without* operation, and from their published statistics we find that out of *six hundred and fifty cases* only *eight* were cured by means of the knife.

Such we see to be the results of the treatment of this disease, from the report of the surgeons themselves in the Cancer Hospital of this great city. The lead and oil, the carrot poultices, the sulphate of copper and borax, the per-manganate of potassa and all their other vaunted remedies results in the simple fact that out of *six hundred and fifty cases* only *eight* were cured, not by these remedies, but by the knife. When the illustrious Scarpa says that in his immense experience he only knew of three cases of cure by ablation, I very much fear, that these eight cases of

supposed cure, will not be permanent, but I know that these unfortunate *eight* cases will soon find themselves in a worse state than they were before.*

Regarding the fate of the remaining six hundred and forty-two, the surgeons give us no information, but we are left to imagine their sufferings after enduring either the knife, the blue vitrol and borax, the per-manganate of potassa, the oil and lead, and last not least the agony produced by the irritating dragging carrot poultices.

Chlorate of Potassa.

We have been told that in this hospital they use a preparation of chlorate of potassa.

"If after a cancerous tumour has separated, you have an indolent granulating surface covered with an unhealthy fetid discharge, a lotion of chlorate of potass is often very useful, of the strength of five to ten grains to the ounce of water. Mr. Weedon Cooke adds a little hydrochloric acid to this, and he believes with advantage."†

In all my experience (and certainly after sixteen years constant practice I without egotism can lay claim to a little, and which ought to have some weight) I have never known a single case where a cancerous tumour has been properly enucleated, in which there was an indolent granulating surface covered with an unhealthy fetid discharge. If the disease had been thoroughly removed, this condition would not have existed, and the patient ought to be spared all such unnecessary and painful applications. Indeed where this disease is properly treated, there is no indolent ulcer, no fetor, only a healthy granulating surface discharging healthy pus. If such a state of disease is frequently found at the Cancer Hospital, it clearly proves that these cases have not been properly treated.

Pressure.

The continued pressure of a cancerous tumour in hopes of producing its absorption and cure, was first introduced in 1809, by Mr. Samuel Young. It was fairly tried in the Middlesex Hospital many years ago, when Sir Charles Bell reported against its use, admitting, however, that in some few cases it alleviated pain.

* Several of them have since been under my care.

† *Medical Times*, July 11, 1857, p. 32.

Freezing.

The plan of freezing cancerous tumours was first introduced by Dr. J. Arnott. This gentleman adopts the true pathology of the disease, viz., that cancer consists of an assemblage of hydatids or cysts, possessing an independent vitality. Viewing it in this true light, Dr. James Arnott has brought forward the idea of congealing or freezing these cysts, so as to destroy their vitality, and by this means, combined with pressure, to effect a cure. I have tried this method of congealing several times, but never with success, as I am afraid that sufficient cold cannot be produced to destroy the cyst, without also injuring, to a serious extent, the adjoining parts; and if not successful, it is liable to increase rather than retard disease, in proof of which I will now mention one case, and as the freezing was done at a public hospital, it was no doubt properly performed. There came to me, on the 1st of February, 1854, seeking relief, a poor woman named Caroline May, aged 43, Case LXXVIII., the history of whose case was as follows:—"Has been married four years; last April received a blow on the breast when stooping over a chair. (*This was the exciting cause of the cancer.*) Has been in the Westminster Hospital for two months, and the treatment pursued there was leeching, in the first instance, and afterwards *repeated* freezing. Since then it has advanced with great rapidity, and when I saw it, it was of enormous size, and of such stony-like consistency throughout, that I refused to interfere. As the woman's circumstances were such that it was not possible for her to obtain those comforts which she required, I urged her to return to the hospital."

Objections to Freezing.

From this and other cases in which I attempted to carry out the plan of freezing, *I have come to the conclusion that the degree of cold cannot be applied sufficiently low as to destroy the vitality of the disease, without, at the same time, causing so much inflammatory action in the adjoining parts, that much mischief often must and does ensue. Further, if congealation should in some very few cases destroy the disease in one part, it cannot, and does not, alter the diathesis or tendency to*

its reproduction in other and more vital parts, and in this way, like the knife, hastens the fatal termination of the case.

Narcotics.

Of narcotics, as a remedial agent, it is needless for me to speak, as they seem to be the mainstay upon which the medical profession depend, not for the purpose of effecting a cure, but as a means for assuaging pain. Dr. James Arnott says:—"although opium and its preparations afford relief from pain, this benefit is obtained at the expense of much disturbance of the digesting and cerebral systems, and much deterioration of the general health."—(*Arnott on Cancer, 2nd edition,* p. 13.) Since I have been in London, I have seen more than one patient die, not from the effect of the disease, *but absolutely from the enormous quantity of opiates given to relieve pain.* Not long ago, I was called to see a lady, (Case CCIV.) living in the neighbourhood of Hans Place, Knightsbridge, the patient of a celebrated accoucheur of Grafton Street. This poor lady was treated for cancer of the womb, and had been kept for some time under the constant use of opiates. When I saw her, all appetite was gone: she could take nothing, was constantly drowsy and disinclined to be disturbed, eyes shut, pupils contracted, and pulse feeble and weak. I immediately recommended that no opiates should be given, that stimulants and tonics were the proper treatment; and when I saw her about three weeks afterwards, I found her so much improved as to be able to sit up the greater part of the day, and with even the prospect of being again restored to health. If the large doses of opiates had been continued, one day more, I have no doubt her life would have been sacrificed.

Alterative Treatment.

Sir B. Brodie's treatment.

The alterative treatment has been tried without success—indeed, the profession seem to despair of this disease ever being cured. Several of my patients had consulted Sir Benjamin Brodie; his views were in every case unfavourable, and his treatment a mere placebo; as to operations, his words are, "We find that in the larger proportion of cases in which the operation is performed,

the patient is not alive two or three years afterwards; and in a great many cases, instead of the operation stopping the disease, it *actually seems to hasten its progress.*" His prescriptions seem (as far as my experience goes) limited to four plasters, one a mercurial plaster, one with the iodide of potassium, one with soap, and a fourth with belladona—no rules given as to diet—no medicine prescribed. His advice clearly, though not avowedly, is to do nothing. Yet I am glad and proud to say that my treatment and new remedies have accomplished cures, and afforded relief in instances where Sir B. Brodie had been previously consulted without benefit. "Cicuta, arsenic, iron, iodine, have all been tried," says Professor Burns, "completely, and have so completely failed, that he must be worse than simple who can now use them with expectation of success. The only reason I have ever heard a sensible man give for prescribing any of these, was, 'If we don't prescribe them, *the person next consulted will.*' It is thus that quackery and the idle parade of physic is kept up, and old remedies, known to be of no avail, are persisted in, *rather than inquiry made after new ones,* which, if they do not succeed, at least cannot be more useless than those in fashion. We have heard, indeed, of instances of success, and the narrators, I doubt not, believed what they told: but it is one thing to cure a simple induration, and another to cure a cancer. I appeal to the experience of every medical man whether I be not correct in the assertions I have made."*

Prof. Burns' opinion on Alterative Treatment.

Such is the confession of a most distinguished surgeon and physician, and what is better, AN HONEST MAN.

These are almost all the means yet known and adopted by the medical profession for the treatment of this dreadful disease, and we see by the evidence of many distinguished men that most of these remedies are worse than useless. I do not pretend to cure cancer in every case, but I have cured, with God's blessing, cases where many of these professional remedies had been employed and

* *Principles of Surgery*, by John Burns, M.D., Regius Professor of Surgery in the University of Glasgow.

failed. In proof of which I can refer to those who had been gravely told that their cases were incurable, that there was no hope for them, who are now perfectly well, after having undergone my safe method of treatment. I will now briefly explain the *modus operandi* of my treatment, and prove, by a few cases from my note book, its superiority in every respect to all others yet known.

My treatment in all cases is twofold; viz., to remove the disease, and at the same time to destroy the tendency always existing in the system for its reproduction, or, in other words, to affect the cancerous diathesis, and thereby in many cases affecting a radical cure. To accomplish this I employ certain remedies according to the nature of the case: these remedies I maintain have a specific action upon the cancer itself, and upon the cancerous diathesis. In those cases where the disease primarily shows itself, I employ it in such a manner as to produce absorption of the tumour, which is frequently accomplished in a very short space of time. It acts, in the first place, in destroying the vitality of the cancerous growth, and, at the same time, exciting a healthy action in the absorbents, the diseased mass is thereby removed. This is accomplished without pain, indeed the reverse, for the pain peculiar to this frightful disease is speedily assuaged and entirely ceases. These remedies have a peculiar soothing effect; the skin remains sound and unbroken, all inflammatory symptoms soon disappear, and the breast speedily assumes its natural softness and shape. During this local treatment the system is acted upon by the same remedies, taken internally, which tends to remove the cancerous diathesis. This is all important; for it is now universally admitted that this disease is altogether one of the blood.

In other cases, however (and I am sorry to say they are the most numerous, as many only come to me in the latter stages of this disease), I am compelled to use different means. The local disease must be removed. This I accomplish by means of the same agent combined with other ingredients, which speedily

attacks the far-advanced disease, and in the course of two or three weeks it is removed, or rather removes itself, for when all is destroyed it drops out, leaving a healthy sore which speedily heals. In these cases, like the others, the general health is not neglected; but the remedies are given internally, and I am proud to say that many desperate cases that have been pronounced by the most eminent in our profession to be incurable have been cured by these means, and have remained well to this day. It is necessary, however, that I here solemnly state that I do not pretend to cure cancer in all cases. In no case can I vouch for its not returning at some future time; but, as I will show by cases, I have been most eminently successful even in the far advanced, the worst forms of this sad disease. What I claim for this treatment is, that it is the best for cancer yet known, and that it is more or less efficacious in all stages of the disease. Further, the innocuous nature of the remedies allow them to be employed in cases where all others are unsuitable. It can be applied to the tongue without danger and with benefit; it can be swallowed with impunity; and it can be applied to the womb with great advantage, not in the least affecting the adjacent parts. From the well known delicacy that always exists in this disease, it would be wrong in me to give the names of the parties who have been under my care, but as all the cases are numbered, I shall be most happy to give any party further particulars who may desire it. These cases I shall divide into three classes.

1st. Those in which there has been no previous surgical interference.

2nd. Those who have submitted to the knife, or who have suffered from some of the caustics or other surgical interference.

3rd. Those who have come to me in the last stages of the disease, and who have experienced a certain amount of relief, their pain assuaged to a certain extent, the profuse discharge checked, and their lives prolonged with comfort to themselves and their friends.

1st. A few cases which I have treated where there has been no previous surgical interference.

Case CXLIII. Miss H.—Cancer of the left breast. This lady came to me on the 12th August, 1854. Upon examination I found a small hard lump, about the size of an egg, in the left breast. She suffered at times from sharp darting pains, and it was at this time rapidly increasing in size. The disease was hereditary in her case, her mother and sister having died from it. I put her under treatment, when she returned home to Bristol improving by degrees, until July, 1855, when all remains of disease had disappeared, the tumour was absorbed, all pains gone, and even although the hereditary taint was strongly marked, yet I have no apprehension of a return. I received a letter from her brother, dated the 19th October, 1855, in which he says, "that she continues quite well."

This case was treated by absorption.

Case CCCVIII. Mrs. ——.—Cancer of the left breast. About the middle of December, 1855, this lady was confined, and her breasts were mismanaged. I saw her first upon the 28th March, 1856, when I found that both breasts had been repeatedly lanced; the right one had got well, but I found the whole of her left breast transformed into a nasty hard tumour, the nipple drawn in, and constant pricking pains. It was not until the 6th May, 1856, that I made my first application. Upon the afternoon of the 30th of the same month, when attempting to put on her shawl without assistance, previous to going out, her tumour came away. It healed rapidly, and she was dismissed quite well upon the 22nd July following.

Case CCCXX. Miss ——, of Glasgow.—Cancer of left breast. This young lady had a hard cancerous tumour in her left breast for more than a year. The usual symptoms of the disease were fully developed. It was a case of hereditary cancer, her mother having suffered from it. I commenced treatment upon her 28th May, 1856. Upon the 28th June the tumour fell out, and on the 15th July she returned home quite well. She remains free from all reappearance up to the present time.

Case CCCXXI. Miss ——, Isle of Bute.—Cancer of left breast. About two years ago a small hard tumour appeared in the left breast. When I first saw her in the spring of 1856 the tumour had greatly increased. Her general health was much impaired, and she constantly suffered from lancinating pains in the affected breast. I commenced treatment upon the 21st May, 1856. Upon the 17th June the disease

fell out, and she returned home quite well upon the 5th August following. I have since heard from this lady, and she remains quite well, her general health being fully re-established.

Case DXXXIV. Mrs. ——, Northamptonshire.—Cancer of left breast. This lady had been suffering from a malignant tumour in the breast for some years. Latterly she has been troubled with the lancinating pains peculiar to this disease, with numbness and pain in the hand and arm. I first saw her upon the 2nd July, 1856, but did not commence treatment until the 11th of the same month. Upon the 12th August the tumour dropped out, and upon the 19th September she returned home, being quite well.

12th October, 1857. I have frequently seen this lady since, and she remains quite well.

Case DCXLIX. Mrs. ——.—Cancerous tumour on right shoulder. This lady was the wife of an officer in the Royal Artillery. Her mother and grandmother had died from cancer. About three years ago a small lump appeared upon the deltoid muscle of the right arm. The sleeves of her dress having irritated it, it rapidly increased. It had all the symptoms of malignant cancer. Upon the 9th September, 1856, I commenced treatment. On the 26th of the same month the disease came away, and on the 28th October she was quite well.

Case DLIII. Mrs. B., Yorkshire, cancer of right breast; this was an unhealthy looking woman. About three years ago she noticed a swelling in her right breast which gradually increased, giving rise to constant darting pains and much uneasiness in the arm and hand. This patient was observed by several medical gentlemen who saw her, to have the peculiar waxy, anxious expression, which always accompanies this disease when the system is fully impregnated with it. I undertook the treatment with but little hopes of ultimate success. I commenced upon the 6th October, 1856, upon the 12th November the disease came away, and on the 29th December she returned home quite well. This was a remarkable case as it showed the great influence of my remedies upon the well marked cancerous diathesis, for as they became absorbed and their influence felt on the system, I noticed a change daily in the expression of her face. The waxy, anxious look speedily disappeared, and soon the patient looked in perfect health. I have since heard from this patient and she continues quite well to the present time.

Case DCLVI. Mrs. ——, C. Rectory, W. Dorset. Cancer of right breast. This lady has been for many years in delicate health, so

delicate as to be obliged to spend the winters abroad. She also possessed a peculiar sensitiveness to suffering—little pain often tending to produce convulsions. A very unfavourable case, especially at this season of the year (October, 1856). She noticed a hardness in her right breast some years ago, but it gave her little uneasiness, until a few months since when she suffered from the peculiar pains of cancer; the nipple was retracted and the whole breast of a hard lumpy feel. I commenced treatment upon the 11th of October, 1856; from her sensitiveness to the slightest pain the treatment was retarded, so that the tumour did not come away until the 12th November. After this the healing process advanced rapidly, and on the 1st January, 1857, this lady returned home quite well. I had the pleasure of seeing this lady a few days ago (October 12th, 1857) and found her breast quite well.

Case. CLXXVII. Miss. K., aged 75 years, cancer of the left breast. This lady had been suffering from cancer of the breast above two years; when I saw her upon the 17th December, 1856, it was upon the point of ulcerating, and from her advanced age and general debility I did not urge treatment. At her solicitation, however, I commenced upon the 31st of that month, upon the 30 February, 1857, the tumour came away but having been attached to three ribs, and as I have before stated that my applications will destroy all disease, I found that a portion of the fourth, fifth, and sixth ribs had also been destroyed. As it takes a much longer period for dead bone to separate than other parts, it was not until the 14th March that they separated and came away. During this period she was very feeble, and was threatened with dropsy in her limbs. After this, however, she continued to improve; the wound granulated nicely, there was no appearance of disease, and everything promised a happy and speedy termination of the case, until the 13th April. About six o'clock in the morning her maid entered her room and found her very well, having passed an excellent night. She propped her up in bed, and went for coffee which Miss K. was accustomed to take at that hour, she returned in about five minutes and found her dead. She had died from disease of the heart. In all human probability if it had not been for this affliction, she would have entirely recovered.

Case DCCCIII. Mrs. ——, Tottenham. This lady came to me in June, 1857, when I found a nasty hardness in the left breast accompanied with sharp darting pains at times. I could not positively say whether it was a case of true schirrus or not. Its characters, however, were very suspicious. In this case I used my absorbing treatment. I saw this lady four times, at intervals of about a fortnight, each time

I noticed a change for the better, and when I last saw her (the beginning of August last), almost all hardness had disappeared. I ordered her to continue the treatment for a few weeks longer, and if not well to come back and see me. I have not heard from her since.

I think I have now quoted enough of these cases, to convince any unprejudiced mind of the value of my treatment. I shall now copy some cases who have submitted to the knife, or who have suffered from some of the caustics or other surgical interference.

Case XIV. Miss M., aged 28, of Parson Street, Glasgow had a malignant sore, the size of a shilling on the right cheek for seven years. Was under the care of Dr. Ritchie and Professor Laurie, of Glasgow, who tried every means to heal it up, by the use of strong caustics and hot irons; but it gradually grew worse, causing much pain, and great uneasiness to the sufferer and her friends. She came under my care on the 28th of February, 1853. On the 20th March the diseased portion separated *en masse*, and on the 9th of April she was dismissed perfectly cured, the sore being healed over by a firm cicatrix.

When in Glasgow last August, this lady came to see me, and although the original part was quite well, yet there appeared a suspicious looking pimple near. I prevailed upon her to come up to up to London, and in the course of two or three weeks all suspicious appearances disappeared, and she was quite restored.

Case XXXIV. Mrs. Peat, aged 67 from Lanark, N. B., has cancerous ulceration over the frontal and temporal bones, on the left side, with caries of these bones. The disease commenced about twenty-seven years ago, with a small wart, which ulcerated. Two years from its first appearance, and when the size of a large pea, it was excised. Four years after, and when the integuments to the size of an inch in diameter were involved, and the operation was again repeated. The disease again re-appeared, and has extended itself more rapidly, especially during the last three years. I was unwilling to undertake this case, on account of the virulence of the disease, and the advanced age of the patient; but on the 6th May, 1853, I commenced its treatment. All disease was removed, and Mrs. P. returned home quite well on the 12th of October.

This lady is perfectly well, without the slightest appearance of the disease.

June 1st, 1855.

Case XCIX. Mr. H., from York. This gentleman, aged 62, had a malignant scirrhus tumour on the right cheek, of seven years standing. He had consulted many surgeons of eminence without relief. I commenced treatment on the 5th April last, and on the 18th May all disease had been removed, and the sore quite healed. I subjoin an extract from a letter from him after his return home, dated 25th May, 1854 :—

"My face has been examined by different M.D's and surgeons here, who all admire the cure, if it be permanent. One medical man, whom I have known for many years, has recommended different cases of cancer to come to you directly, and given them your pamphlets to read, and they are considering of it; but they foolishly believe there is no cure for their disease. I would be glad of some more pamphlets, as people who see my face are most anxious for them, many of them having friends labouring under cancers, who hide them from the knowledge of everybody, thinking their case hopeless."

I have seen this gentleman twice since he left London, and have heard from him several times, and he continues quite well.

10th November, 1854.

I am sorry to say that this gentleman died last month from an affection of the liver, which was caused by grief at the loss of his son, a young officer, who fell in battle at the Crimea. The original cancerous sore remained perfectly healed till the day of his death.

June 1st, 1855.

Case X. Miss P., Glasgow.—Cancer of left breast. I first saw Miss P. in the latter end of January, 1853. Previously, she had suffered from the disease for about four years, and had undergone two operations. At this time her strength was so reduced by disease and suffering, that she was obliged to lie down during the greater part of the day; indeed, it was only with great care and caution that she was brought up to London. When I first saw this lady, I refused all interference with her case, for I considered it to be quite hopeless. Her brother then called in Sir Benjamin Brodie, and Mr. Lawrence. They both considered the case hopeless, and said that nothing further could be done, and gave it as their opinion that she could only live a very short time. After this, Mr. P. urged me to try what could be done, promising to exonerate me if I should fail; I made my first application upon the 3rd February, 1853, upon the 28th of the same month all disease was removed, and upon the 8th of April it was quite healed. Immediately her strength rapidly increased, and for the long space of three years she was perfectly well. In the spring of 1856, when travelling in Italy,

the disease re-appeared, and upon her return to this country she again placed herself under my care. The disease this time appeared in more than one place, and it required a long time for its removal. She was under my care for ten months, and I had every prospect of again affecting a cure (if such a term can be applied for a time); when her sister, Mrs. B., having derived some benefit from another surgeon for a skin disease, urged her to try him. She was under this gentleman for about three weeks, but getting gradually worse, she returned to Scotland. Surely such a case as this ought to convince the most prejudiced that there is some good in my treatment, and that it ought to be made known, for here we see a poor woman (pronounced to be dying by two of the first surgeons of the present day), restored to sound robust health for a space of three years, this is a very strong, a very powerful proof of the efficacy of my treatment.

Case LVIII. Miss L., age about 50, from Berkshire.—"In July, 1849, I first found a small lump on my right breast, the size of a pea, without pain or tenderness. On the March following it enlarged, and in May I consulted Mr. Lawrence, who recommended its removal; in October, Mr. Hitchings, of Oxford, removed the tumour. In twelve months after it again appeared, and in March, 1852, I had the whole breast taken away. In nine months the disease again appeared, and in July, 1853, I first came to you for advice."

I found this a most unpromising case—being one of Colloid Cancer; yet, at the lady's urgent request, I consented to undertake her case; and now the disease is not only completely checked, but the lady's health is better than it has been for years.

P.S.—I have not seen this lady for many months, but I hear that her general health is beginning to give way, but that she suffers no pain whatever in the seat of disease or elsewhere.

1*st December*, 1855.

This lady died during the spring of 1856. She suffered no pain, and seems to have died solely from exhaustion. In this case the lady's life was prolonged, without suffering, for at least two years.

Case CXXXIX. Mr. Lauder.—100, Garscub Road, Glasgow, 20th July, 1854. Cancer of the lip; is foreman in a manufactory at Glasgow. About Christmas last, in coming out of the gate of the works, he was accidentally struck on the lip by a boy with a switch. It was painful at the time, and left a small hard lump. About three months ago it commenced growing and shooting out a stem three-quarters of an inch in length. He went to a doctor, who burnt it with caustic,

which made it bleed profusely, and gave great pain; it grew almost immediately again, and was burnt down with caustic several times. He came up to me on the 20th July, 1854, when, upon examination, I found a small cancerous tumour in the lip. I at once commenced treatment, and he returned home, perfectly well, on the 22nd August, having been just one month under treatment. I lately heard of Mr. Lander; he remains quite well.

3rd November, 1857.

Case CCXX. Mrs. ——.—30th May, 1855. Ulceration of the neck of the Womb. This lady placed herself under my care this day. She told me that for some nine months she had been cauterised almost weekly, and her sufferings at times were very great. She complained of great pains in her back and in the loins, with a draining discharge, which was sometimes mixed with blood. Upon examination I found the anterior and left side of the neck of the womb in a state of malignant ulceration (not cancerous). I applied my remedy daily to the parts without her suffering any pain, and in the course of six weeks she returned to Ireland, quite well.

Case CCCXIX. Mrs. ——, of Glasgow, aged 70 years.—This old lady in 1837 suffered amputation of the left breast; it healed up, and it was not until 1852 that any reappearance of disease took place. (This is the longest period upon record between an operation and the re-appearance. For Mr. Paget, in his valuable work states, that he has not known a longer period than eight years to intervene between the operation and the recurrence of disease.*) It recurred as a small tumour, which soon assumed the true cancerous type. I first of all, on account of her advanced age, tried to check the disease; but not proving successful, she came under active treatment on the 14th May, 1856; upon the 4th June the diseased mass came away, and upon the 15th July following she returned home quite well, and continues so to the present time.

Case DXLI. Mr. W.—Cancerous ulceration of the left cheek and angle of the eye. This gentleman some three years ago received an injury on the left cheek, to which caustics were applied; it speedily degenerated into a malignant sore. Caustics were again applied without benefit, it daily becoming worse. I saw him upon the 3rd July, 1856, when I commenced treatment. All disease was removed by the 4th August, and upon the 16th of the same month he returned home quite cured.

* Paget's "Lectures on Surgical Pathology," Vol. II. p. 347.

Case DLXIV. Mrs. Walker, Kilcattan Bay, Isle of Bute.—This poor woman was the wife of a farm servant, and the mother of a large family. About three years ago she noticed a lump in her right breast, which speedily increased in size, accompanied with darting pains. She showed it to her doctors, who stated it must be cut out. This was done about a year since. The cicatrix had scarcely been formed ere the disease reappeared. The surgeons proposed a second operation; to this she refused to submit. She came up to me on the 3rd October, when I found extensive cancerous disease along the cicatrix and under the pectoral muscle. I gave her no hope of ultimate success. Upon Friday, the 31st October, I commenced treatment. Everything went on very well: upon the 24th November the tumour came away, and upon the 30th January, 1857, she returned home quite well. I received the following letter from her last July.

"Kilcattan Bay, July 20, 1857.

"Dear Sir,—I have to inform you that Mrs. Walker, your late patient, received your letter of 9th May last, and is happy to say that she is now perfectly recovered, while her general health improves daily.

"She desires me to offer you her most grateful thanks for your kindness and attention.

"Yours respectfully,

"Elizabeth Robertson,

"for

"Janet Walker."

Case DLXXII. Captain D., Liverpool.—Cancer of the lower lip. About two years ago a small hard lump appeared on the lip, which gave no pain or uneasiness. Unfortunately, in February, 1856, he fell and and broke a tooth, which injured it; immediately after this he first felt the sharp darting pains. Soon afterwards he went to Harrowgate and put himself under the care of a galvanist, who galvanised it. This alleviated the pain, which by this time was constant, but it increased with great rapidity. He now placed himself under the care of Dr.——, of Birkenhead, who used causties; under his treatment it rapidly increased. Seeing that it was getting rapidly worse, he went to Dr. Oldham, of Birmingham, who said he could cure it in three weeks. This gentleman first applied a powder to the disease, and then plaisters. This treatment, instead of curing, aggravated all the symptoms. It increased the size, and the pain became almost unbearable. He remained with Dr. Oldham four months. He came up to me on the 27th November, 1856, when I found a large cancerous fungous growth,

involving the lower lip and chin. It was a most unfavourable case, yet I consented to treat it. I commenced treatment on the 28th November, 1856; upon the 17th December all disease was removed, and upon the 8th January, 1857, the parts were all healed, with little or no deformity, and he returned home quite well. I have heard from other patients since of this gentleman. He remains quite well.

Case DLXXIV. Miss P., Golden Square, Regent Street, London.—Cancer of left breast. This lady first observed a lump in her left breast in the autumn, 1854. She consulted Mr. Lawrence, who proposed an operation. After a time she consented, and this gentleman excised the breast in the month of August, 1855. Although in strong robust health, yet the effects of the operation were such that for some days her life was despaired of, and it was a month before she could leave her bed. Almost as soon as the wound was healed the disease reappeared. I saw this lady upon the 3rd December, 1856, but did not commence treatment until the 22nd of the same month. Upon the 13th January, 1857, the diseased mass came away, and upon the 5th March following she was well.

Within the last nine months I have had many similar cases, and all attended with the same favourable results; but the cures have been too recent to place them on record. There was one case among the rest, so remarkable in its character, and which proves the great advantage of my treatment even in the most nervous and delicate, that I cannot refrain from quoting it. The history of the case is as follows:—

Case DCLXXXVI. Mrs. ——, the wife of the rector of St. L—— Church, London. Cancer of the left breast. This lady was remarkable for her nervous excitement. She was subject to spasms and fainting fits. Several of the members of her family have died suddenly from disease of the heart. Her heart is evidently diseased. Some two years ago she first noticed a hard tumour in the left breast, accompanied with darting pains. She consulted her regular attendant, an old-established surgeon in Old Broad Street, City, who pronounced it to be schirrus. She then placed herself under the care of Dr. Batchelour, of London, a friend of her husband's, who tried his treatment for some time: at last, however, finding it of no avail, he frankly told Mr. —— that he could do his wife no good, but advised her to throw away the remedies he had ordered, and do nothing. This manly candour was becoming an honest man. After this I saw her, and found a hard stony lump in

the left breast. The nipple retracted. The arm numbed and painful. Her general health feeble, subject to spasms and faintings, her appetite destroyed. It was, indeed, about as unfavourable a case as could be found. Having fully explained to the lady and her husband that my treatment in such a case would in all human probability be useless, at their earnest request I commenced treatment the 10th of March, 1857. The treatment was in a measure interrupted by feeble health; however, upon the 13th of April, the hard stony mass fell out; and upon the 17th of June following, she was well, the parts healed, and her general health restored. Surely, after such a case as this, a case to which I can refer any respectable party, there can be but little doubt as to the great success of my treatment for this disease, even in such extreme cases as this one. Surely these cases are sufficient to convince any unprejudiced mind.

I shall now proceed to quote some of those cases which came to me in the latter stages of the disease, and which have experienced a certain amount of relief, their sufferings assuaged to some extent, the distressing effluvia destroyed, the profuse discharge checked, and their lives prolonged with comfort to themselves and to their friends.

Case LXXII. Thomas S.—On the 18th of February, 1851, this patient received a severe blow on the left malar bone. About four months afterwards a sore appeared in the upper jaw-bone. Dr. D., of Carluke, burnt it with caustic, which made it rapidly worse. On the 5th of October, 1852, he went into Edinburgh, and placed himself under Dr. Dunsmore, being an outdoor patient of the Royal Infirmary. The treatment consisted of applying some liquid to the part and scarifying it now and then. During this period he was repeatedly seen by Dr. M'Kenzie and Mr. Syme; both recommended an operation, which was performed on the 21st of January, 1853. He was only fifteen days in the Infirmary when he left for home. It was completely healed in about six weeks. However, in twelve or thirteen weeks from the date of operation, it again reappeared, and he again returned to Edinburgh, when Dr. Dunsmore burnt it with caustics, which made it worse. A *second* operation was proposed, but he refused to submit, and returned home. I saw this patient on the 28th December, 1853, when I found both nostrils, the whole of the upper jaw-bone, and roof of the mouth in a state of cancerous disease. In this fearful state of things I could do but little. He continued un-

Of the upper Jaw.

der my care until 3rd May, 1854, when at my advice he returned home, and during this period I was enabled partially to check the disease, and alleviate his suffering.

Case CIV. Serjeant Mitchell, cancer of the tongue.—Disease first commenced last November, caused by the irritation produced by a decayed tooth. Since then it has increased, and is increasing rapidly, the greater part of the left side being involved. I made my first application on 3rd May last; but I had to give up treatment on the 13th of same month, as his leave of absence had expired; yet during this short period the disease was checked, and partially removed. On the 21st June he thus writes:—

"Armoury, Shrewsbury, 21st June, 1854.

"Sir,—I take the liberty of addressing you, to return thanks for the treatment I received from your hands, and I must confess it has been the saving of my life. I am only sorry that I could not remain longer under the same treatment.

"Sir, your obedient humble Servant,

"Martin Mitchell.

"Quarter-Master Serjeant, Shropshire Militia, Shrewsbury."

Case XXXII. Mrs. H., aged 54, from Essex, has open cancer of the left breast; no operation has ever been performed; is a corpulent, unhealthy looking woman, with cough, asthma, and dropsical symptoms; remained under treatment for two months, during which time the progress of cure was so remarkable, and her relief from previously constant suffering so great, as to excite surprise amongst her friends. Her former medical attendant happened to see her, and expressed his opinion that the cancerous affection would be cured, provided the existing disease of internal organs did not prevent it; which opinion proved correct, as she died of the dropsy on the 12th of July, 1853, the cancer progressing favourably.

Case CCXXXIX. Mrs. C.—This lady came to me upon the 25th August, 1855, and I found nearly the whole of the left breast one cancerous mass, with enlargement of the axillary glands. The tumour also pointed at two separate places, threatening immediate ulceration. I immediately commenced treatment, and at this date (7th December, 1855), I am glad to say that the tumour is much smaller, *ulceration has been prevented*, and now she rarely suffers from the cancerous pains that formerly disturbed her rest; her general health is much improved, and I have no doubt but that a radical cure will be effected on this seemingly unpromising case.

Case CCXXXIV. Mrs. C.—I saw this lady upon the 8th August, 1855, and found her labouring under cancer of the axilla (armpit). It first appeared about two years ago. Since then she has been under the care of the most eminent surgeons in London. Upon examination, I found the left breast and axilla fearfully involved in cancerous disease. The arm was also enormously swollen, and she suffered much pain, it constantly darting through the parts to the lungs. They were also involved, and I detected slight effusion. I was unwilling to interfere in such a hopeless case, but as all others had been tried, I was urged to do what I could. I applied remedies to the parts, and I am glad to say that I reduced the swelling of the arm in a great measure; I checked the disease in the armpit and breast, relieving her in a great measure from suffering, and also for a time checked the effusion in the lungs. But she was removed to Ramsgate, where the effusion rapidly increased. She died upon the 15th October, 1855. Her husband, in writing to me on that day, says, "*Your remedies certainly greatly relieved her.*"

Case LIX. Mrs. F., from Huddersfield, applied to me in September, 1853, with cancerous ulceration of the breast, so deep and extensive, that at first I not only held out no hope of a cure, but declined all interference. At the urgent solicitation of an only daughter, I undertook to treat the case for one fortnight, in the hope of affording temporary relief. The relief afforded was so great, the improvement in the disease so marked, the pain so diminished, the large amount of discharge so checked, its offensive character so altered, and her general health so materially improved, that at the end of the fortnight I consented to continue my treatment. She continued to improve in a marked manner, as satisfactory to herself as to me, until December, when, through changing her lodgings to a considerable distance during the prevalence of severe weather, she was seized with bronchitis. This yielded to the usual treatment, but the consequent debility was more than her weak frame could bear up against. Before her death she expressed herself strongly as to the amendment in the cancer; and had she been spared the inflammatory attack, I do not doubt that my treatment would have given further relief, and prolonged her life.

Case XXXIX. Mrs. J., aged 54, has had cancer of an inward part for twelve years. The situation of the disease prevents my reporting the case in full. I will only state that it is one of the worst forms and situations of cancer; one in which the operations and remedies of the profession can avowedly do nothing. This patient consulted to no

purpose the leading surgeons and accoucheurs. The result of my treatment, after ten months' trial, has been highly satisfactory; she is now going on favourably. Each separation of diseased portions admits a deeper application of my remedy, and her general health is good. The following letter I received from her during the treatment:—

"16th January, 1854.

"Dear Sir,—I can with pleasure testify to the great benefit I have received under your treatment for the last eight months, previous to which my case was considered quite hopeless by all the first London surgeons. I now suffer very little pain, and feel myself daily progressing favourably. I shall be happy to answer any inquiries that may be addressed to me.

"I remain, yours gratefully,

"* * * *"

This case (although, as might be expected, terminated fatally) shows in a remarkable degree the power of my remedy in checking disease, and alleviating suffering, even in such a desperate case as this.

November, 1854.

Unfortunately, there are many much worse cases than those described above, and show to what a terrible state this disease will sometimes reduce a poor sufferer before released by death. The following case I met with in the course of practice, and I am sorry to say it is not the only one of the same kind:—

Case CLXIX. Mrs. D.—October, 1854.—I was called upon to visit a lady in the neighbourhood of Regent's Park. The previous February she perceived a tumour in the breast, and by the advice of her medical attendant, consulted Mr. Ferguson, who ordered leeches. These, as is often the case, brought on an attack of erysipelas, and the whole breast was soon in a state of ulceration. After this the lady was attended by a homœopathic surgeon for some time, and she was rapidly getting worse; a French clairvoyante, or mesmeriser, was called in, and the result was, that in the latter end of October, when I first saw her, she was *dying*, the disease having so rapidly increased in eight short months, that both breasts were in a state of ulceration, also the glands in both axillas, and the arms and the hands enormously swollen. The glands of the neck fearfully enlarged, and extensive cancerous tubercles deposited in the lungs, liver and spleen, the two latter of immense size, the parotid on the right side also in an ulcerated state. As may be supposed, her agony was frightful, yet even in this hopeless and des-

perate case, I was enabled, through God's blessing, to assuage her sufferings, and for the short remaining period of her life, to render her comparatively comfortable.

Yet even in such desperate cases, I have been enabled, through the blessing of Almighty God, to assuage their fearfu agony, so that their latter days were comparative peace; and I have the heartfelt satisfaction of knowing that I alleviated much pain and suffering, and more than this, that I have had the thanks and blessings, not only of the afflicted ones themselves, but of those connected with them. This is no vain boast or idle tale of the imagination, for I can refer the incredulous to the friends of those who suffered.

Case XXX. Mrs. T., aged 54, from York, has cancer of right breast. In the spring of 1852 she was operated upon. The disease shortly afterwards re-appeared and ulcerated. She came under my treatment on the 25th April, 1853, and continued until early in September, when she went home much improved. Her husband wrote to me on the 25th November, 1853, and said:—"I am happy to say that I think she is even better than when she left you, and could almost fancy that the wound is less than when she first came home. Her health is very good, and she has very little of the original pain, with the exception of an occasional aching in the arm, and there is no offensive smell from the wound. From these indications I come to the conclusion that she is much better than she was before she came to you. I am using my influence to induce her to come to you again, and I think she will be prevailed upon."

* * * * *

It is to be regretted, that this patient left London at so early a period, contrary to my advice, and just when my remedy had begun to do good. In so serious and formidable a disease, time is a necessary and important matter in accomplishing a cure, and patients act unfairly to themselves, when they insist on returning home on the first indications of amendment.

I have heard nothing from this case for several months.

1*st June*, 1855.

Case LXIV. Miss B., aged 38, from Dublin, two years ago had an operation performed on the right breast by Sir Philip Crampton. The disease re-appeared almost immediately. On consulting me, I

found an open cancer. She suffered considerable pain, and had an unhealthy look; was under treatment nearly five months, when nearly all disease was removed from the breast; but symptoms of liver complaint having come on, her friends called in Dr. Todd, who suspected tubercles of the liver, and at his recommendation she gave up my treatment and returned home.

This lady left London early in November. I received a letter from her sister, dated 13th December, in which she say that Miss B. "has less suffering than most people in that painful disease; but the diseasce is growing very fast in the breast."

I have no doubt that this freedom from suffering was the result of my remedy, and that had she not been under it, the pain (very considerable when she first applied to me) would have much increased, and rendered her trial even more severe. The above extract from the letter also proves the power of my remedy in arresting the progress of the disease; no sooner was it discontinued, than, as the letter says, the disease re-appeared. It is a serious question in so serious a case, where cancer exists in the breast, and cancerous tubercles in the liver, which of the two diseases should be regarded as a more imperatively demanding interference. Whatever, as in the present case, does good to the one will be productive of some injury to the other. But when we find a patient with two diseases, one attended with considerable suffering and pain, but external and accessible to treatment and consequent relief; and the other inward, beyond our reach, and accompanied generally by a mere sensation of uneasiness rather than actual pain, is it not our duty to attend the outward malady, though at the risk, or even the certainty of quickening the progress of the internal disease—to alleviate suffering where we cannot cure, and to mitigate or avert that greatest of all additions to illness, which breaks down the mental as well as the physical powers—severe pain?

Case CCIII. Mrs. M'C.—This lady came to me on the 9th March, 1855. She had been suffering from a tumour and a lump in her breast for some years; latterly it had grown with great rapidity, and she suffers very much from the lancinating pain. Upon examination, I found the breast enormously enlarged, and hard as a stone, being one lump of scirrhus, the glands underneath the arm also much affected, and the arm swollen. In such a case I could only promise relief. She commenced treatment in April, and I am glad to say, I afforded much relief. She died upon the 7th November last, and her daughter, writing to me on 13th of the same month, says, "You will like to know that

my dear mother always thought and spoke most highly of you, and your skill has alleviated sufferings that might have been dreadful, which I thank God they were not, at any period of her illness when under your care. I hope that you will meet with the success in your profession that you deserve."

Case XCV. Mrs. ——.—24th March, 1854. Upon visiting this lady this day, I found her in bed, suffering great agony. Had been cauterised very frequently, which caused great pain. Her sufferings were so severe that she could not sit up for any length of time—the discharge profuse, and highly offensive. Upon examination, found the greater portion of the neck of the womb had been destroyed, and the remainder affected with true cancerous ulceration. The neighbouring parts had been much injured by the caustics, and one portion also affected by the disease. In this case I could give no hope of cure, but only relief. I commenced treatment on the 26th March, 1854, and in the course of three weeks the sufferer was sitting up in her drawing-room. Pains slowly disappeared. The narcotics were given up at nights by degrees, so that her appetite and general health improved; and in the course of four months she was able to be removed into the country. I did not see this lady again. She lived for about a year after this, and I have heard that she suffered little or no pain to the time of her death.

Case CCCXXX. Mrs. Postal, Hackney.—Ulcerated cancer of left breast. This poor woman has been suffering from this disease for over three years. She was an out-door patient of the Cancer Hospital for many months, but finding herself getting worse daily, she applied to the notorious Mr. ——, or Professor Holloway. She used his ointments and swallowed his pills for a year, gradually getting worse and weaker. She came to me upon the 17th June, 1856, when I found a large excavated cancerous sore underneath the pectoral muscle and axilla (arm-pit) of the left side. I pronounced the case hopeless; but in order to give her some relief I put her under treatment. I was enabled to assuage her sufferings, and gave her much relief. She died upon the 16th March, 1857, after a severe attack of influenza.

Case DXXXVIII. Mrs. J.—Cancer of the tongue. This lady came up to London, and placed herself under my care on the 14th July, 1856. The tongue was involved to a frightful extent with the disease. Professor Syme refused to operate. When I saw her, I at first refused interference with the case, when she went to Mr. Ferguson, who proposed an operation. To this her brother, the Rev.

Mr. P., would not listen; and, after again seeing her, I agreed to undertake the ease, with the hope of prolonging life and easing her dreadful anguish. At this time she was suffering from ptyalism, produced by Dr. Drummond, of Glasgow, and I did not think she could live longer than two months, and although the applications were very painful when on (which was for three or four hours daily), yet she suffered nothing (comparatively speaking) from the disease, and instead of living only two months, her life was prolonged nearly five. She died upon the 12th December last, free from all suffering.

These cases are surely sufficient to prove to the most incredulous that even in the last stages of this most frightful malady. that some good can be obtained by the use of my remedies. Surely, if such be the case, why will people listen to the word INCURABLE? It is a sad one, and falls heavily on the hearts of those to whom it is addressed—yet it is daily spoken, gravely, but kindly, in the luxurious homes, as well as in the public charities of Britain; spoken to high and low, rich and poor, young and old—banishing hopes, and realising fears—shadowing the present, and darkening the future! and the very men who speak that word—who pronounce that sentence, also tell the sufferers that my remedy should not be had recourse to—that the cures of other cases, the personal testimony of the cured, the experience of many, and the per centage of recoveries, are all fallacious, or that they ought not to be listened to;—that if they are correct, they ought not to be so, because, forsooth, they—the surgeons—are not personally acquainted with the means by which the cures are made. I am told, with the hauteur of professional exclusiveness, that our first duty is to our professional brethren, and not to the patients,—that we should suffer these latter to go down to the grave in agony, rather than abate one jot, or thaw one icicle of professional etiquette.

FINIS.